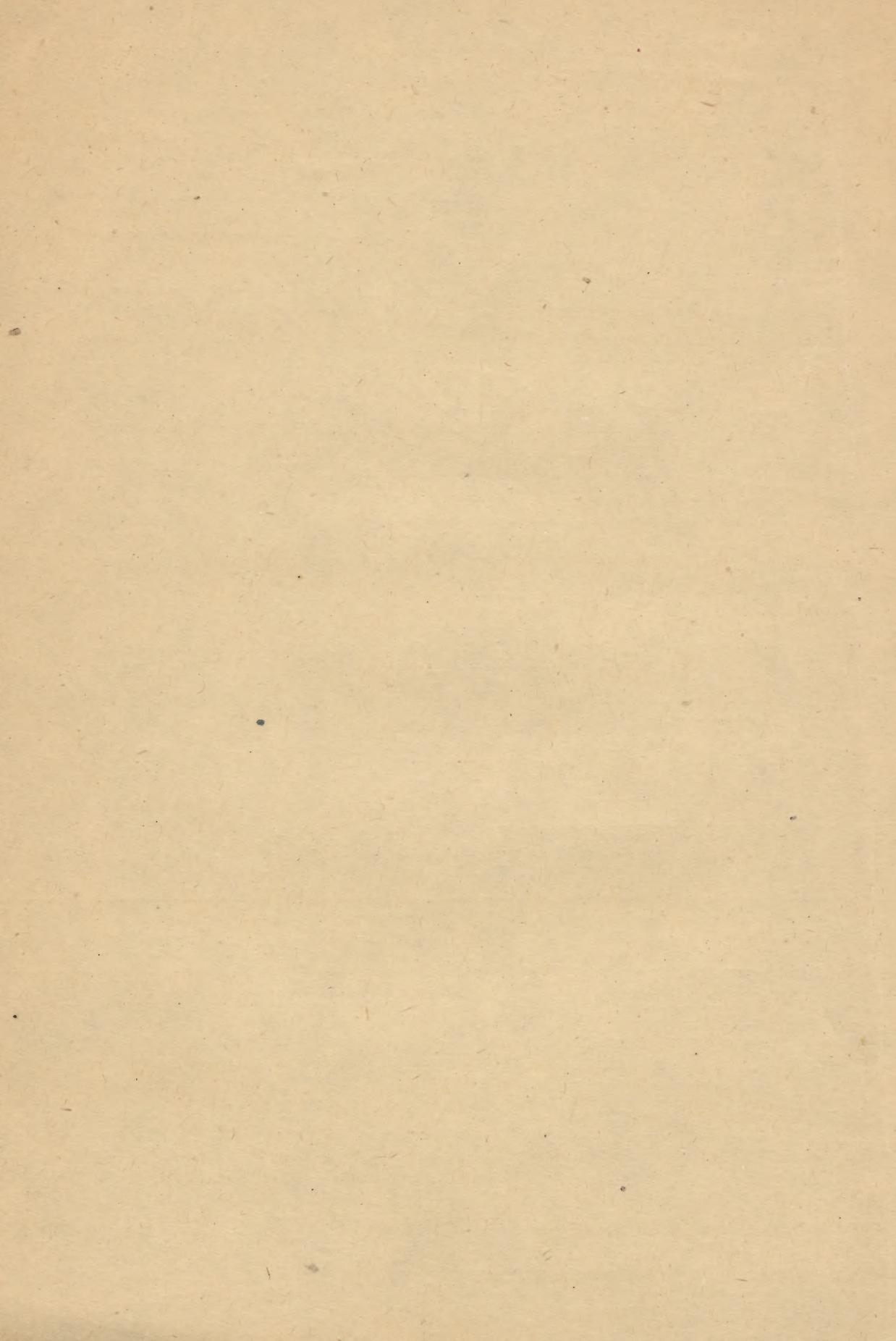


Cohen (S.S.)

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Continuous inhalation from the
new Respirator.





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CLINICAL NOTES IN RESPIRATORY THERAPEUTICS.

III.

CONTINUOUS INHALATION FROM THE YEO RESPIRATOR.

ONE of the most useful, as it is one of the simplest, devices for the inspiration of medicinal vapors is the little perforated zinc respirator devised by Dr. J. Burney Yeo, of London, and described by him in the *British Medical Journal*, July 1st, 1882.

In New York, through no fault I am sure, of my friend Dr. Beverly Robinson—this little instrument is erroneously called “Robinson’s Inhaler.” It is, however, as already stated, the device of Dr. Burney Yeo, of London. Prof. J. Solis-Cohen and I began using it immediately after Dr. Yeo’s publication, and our results after two years’ experience were reported by me in *The Medical News*, October 11th, 1884.

It is, as will be seen from the illustration, simply a little cage of perforated zinc bound with cloth or chamois-skin, carrying a sponge and fitted with elastic loops to attach it around the ears, so that it fits over the nose and mouth. The respired air becomes impregnated with the vapor of any volatile medicament dropped upon the sponge; and as the little machine, being light and cleanly, can be worn for prolonged periods, a continuous medication of the respiratory tract is thus effected. The apparatus was first made for us after a



pattern kindly forwarded by Dr. Yeo, and I am informed that thousands of them have been sent all over the United States and Canada since our report in 1884 made the profession on this side of the water acquainted with Dr. Yeo's most admirable device.

Specimen formulæ of the solutions most generally useful are as follows :

R	Creasoti (Beechwood),			
	Eucalyptol (puriss.),			
	Terebenis,			
	Chloroformi,	āā f3 ij.		M.

Sig.—For inhalation, twenty drops to be placed on sponge of Yeo respirator and renewed as necessary.

R	Thymol,	3j		
	Alcohol,			
	Spts. chloroformi,	āā f3 iv.		M.

Sig.—For inhalation, ten to fifteen drops on sponge of Yeo respirator, etc.

Among other medicaments which may be used singly or in combination, are alcoholic solutions of menthol, compound tincture of benzoin, oil of turpentine, oil of pine, (*sylvestris* or *pumilon*), and, indeed, all terebinthinates, balsamics and essential oils. A very useful drug for inhalation in this way is ethyl iodide. It may be used singly or in combination. A favorite formula in the Medical Clinic of the Jefferson Medical College Hospital, during my term of service there, was the following :

R	Creasoti (Beechwood),			
	Ethyli iodidi,			
	Terebenis,			
	Alcohol,	āā f3 ij.		M.

Sig.—For inhalation, twenty drops on sponge of Yeo respirator.

In cases of syphilitic disease of any portion of the air passages ethyl iodide is particularly applicable, but it is often of great use in non-syphilitic phthisis, in simple bronchitis, in bronchorrhœa and in chronic catarrhal pneumonia. It may produce systemic effects, even iodism, if pushed sufficiently. Creasote and thymol find their principal indication in phthisis. Terebene, eucalyptol and the like, are useful in subacute and chronic bronchitis; and when used in phthisis their principal benefit is from their influence upon collateral inflammations. Compound tincture of benzoin is advantageous in acute cases of bronchitis and laryngitis, but steam inhalations are to be preferred in acute conditions, as set forth in the first of this series of clinical notes. Alcohol is used as a solvent and diluent. Chloroform and its solution in alcohol are useful in allaying irritative cough, and in mitigating the sharpness of the more pungent vapors—thymol, eucalyptol, menthol, and some specimens of terebene. In some cases chloroform alone may be employed, especially at night, to secure relief from useless cough which prevents sleep. From five to fifteen drops is usually a sufficient dose.

In making use of the respirator the sponge should be moistened with warm water, all excess of water being removed by squeezing. The medicinal liquor is then dropped upon it, and need rarely be renewed in less than eight or ten

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hours, sometimes not for twelve hours. The respirator should be worn as often as possible during the twenty-four hours, and as long as possible at a time. Many patients can comfortably sleep with the respirator in position. The object is to secure a mild and continuous topical medication.

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